

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Aavishkar Bharara	:	
	:	Art Unit: 2194
Serial No.: 10/800,769	:	
	:	Examiner: Nguyen, Van H.
Filed: March 15, 2004	:	
	:	
For: MULTI-TIER APPLICATION	:	
ARCHITECTURE	:	

**Mail Stop: Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450**

**TRANSMITTAL**

1. Transmitted herewith is:  
Transmittal (3 pages)  
Response to Non-Compliant Amendment (6 pages)

**STATUS**

2. Applicant  
☐ claims small entity status.  
☒ is other than a small entity.

**EXTENSION OF TERM**

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply.

(complete (a) or (b), as applicable)

- (a) ☐ Applicant petitions for an extension of time under 37 C.F.R. 1.136  
(Fees: 37 C.F.R. 1.17(a)-(d) for the total number of months checked below:)

Extension for response within:	Other than small entity Fee	Small entity Fee (if applicable)
<input type="checkbox"/> first month	\$ 120.00	\$ 60.00
<input type="checkbox"/> second month	\$ 450.00	\$ 225.00
<input type="checkbox"/> third month	\$ 1,020.00	\$ 510.00
<input type="checkbox"/> fourth month	\$ 1,590.00	\$ 795.00
<input type="checkbox"/> fifth month	\$ 2,160.00	\$1,080.00

Fee Due \$ \_\_\_\_\_

If an additional extension of time is required, please consider this a petition therefor.  
(Check and complete the next item, if applicable)

- ☐ An extension of \_\_\_\_\_ months has already been secured. The fee paid therefor \$\_\_\_\_\_ is deducted from the total fee due for the total months of extension now requested.

Extension fee due with this request \$

**OR**

- (b) ☒ Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

**FEE FOR CLAIMS**

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

	(Col. 1)		(Col. 2)	(Col. 3)	SMALL ENTITY		OTHER THAN SMALL ENTITY
	CLAIMS REMAINING AFTER AMENDMENT	MINUS	HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA	ADDITIONAL RATE FEE	OR	ADDITIONAL RATE FEE
TOTAL INDEP.		MINUS		=	x \$25.00 = \$		x \$50.00 = \$
		MINUS		=	x \$100.00 = \$		x \$200.00 = \$
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ \$180.00 = \$		+ \$360.00 = \$
					TOTAL ADDITIONAL FEE \$	OR	TOTAL ADDITIONAL FEE \$

- (a)
- ☒
- No additional fee for Claims is required

**OR**

- (b)
- ☐
- Total additional fee for claims required \$

**FEE PAYMENT**

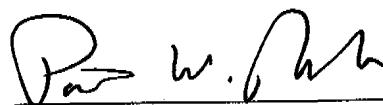
- 5.
- 
- Attached is a check in the sum of \$
- 
- 
- ☐
- Charge Deposit Account No. 01-2384 the sum of \$
- 
- A duplicate of this transmittal is attached.

**FEE DEFICIENCY**

- 6.
- ☒
- If any additional extension and/or fee is required, charge Deposit Account No. 01-2384.

**AND/OR**

- ☒
- If any additional fee for claims is required, charge Deposit Account No. 01-2384.
- 
- 7.
- ☐
- Other:

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